



## PART B - FEE(S) TRANSMITTAL

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Blackmon

TOTAL FEE(S) DUE

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DATE DUE

06/21/2002

PUBLICATION FEE

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		April 9,	2002	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/618,037	07/17/2000	Gary K. Michelson	101.0056-02000	8599

ISSUE FEE

\$1280

TITLE OF INVENTION: SINGLE-LOCK ANTERIOR CERVICAL PLATE

APPLN. TYPE

nonprovisional

SMALL ENTITY

NO

**TOTAL CLAIMS** 

123

EXAMINER	ART UNIT	CLASS-SUBCLASS	İ		
REIP, DAVID OWEN	3731	606-070000			
Change of correspondence address or indication     CFR 1.363). Use of PTO form(s) and Customer is but not required.      Change of correspondence address (or Change Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" PTO/SB/47) attached.	Number are recommended,	the names of up to 3 or agents OR, alternating single firm (having attorney or agent) at	e patent front page, list (1) registered patent attorneys atively, (2) the name of a as a member a registered and the names of up to 2 neys or agents. If no name be printed.	Martin & Ferr	— aro, LL
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☐ Publication Fee ☐ Advance Order - # of Copies	O The	Commissioner is hereby	m PTO-2038 is attached.  / authorized by charge the req(enclose an ex	uired fee(s), or credit any overpatra copy of this form).	syment, to
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Sandra L. Blackmon	(Depositor's name)
Sanda & Blackman	(Signature)
April 9, 2002	(Date)

APPLICATION NO.	FILING DATE	FIR	FIRST NAMED INVENTOR		TORNEY DOCKET NO.	CONFIRMATION NO.
09/618,037 FITLE OF INVENTION	07/17/2000 I: SINGLE-LOCK ANT	TERIOR CERVICAL PLATE	Gary K. Michelson		101.0056-02000	8599
TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
123	nonprovisional	NO	\$1280	so	\$1280	06/21/2002
EXA	MINER	ART UNIT	CLASS-SUBCL	ASS	,	
REIP, DA	VID OWEN	3731	606-07000	5		
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application identified above (Authorized Signature) 04/09/2002

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